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Substitute for Form PTO-875								09/65/439		
CLAIMS AS ELLED PARTY										
C - 11 - 0 C				Column 2)	SMALL	. ENTITY	OR	OTHER THAN SMALL ENTITY		
BA	FOR SIC FEE	NU	NUMBER FILED N		BER EXTRA	RATE	FEE		RATE	FEE
15	-CFR 1.16(8))					┥╆───	3	OR		-
(37	TAL CLAIMS CFR 1.16(c))	17	/7 minus 20 =		0	x \$=		OR	X \$_ =	0
	DEPENDENT CLA CFR 1.16(b))	3 3 3 A	3 minus 3 = .		0	x s_ =	1	OR	x \$ =	
ML	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							OR		0
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	<del>                                     </del>	1	+\$=	0
	•			•	IOIAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										
					(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
ĕ	Total (37 CFR 1.16(c))		Minus	••	=	x \$ =		1	v	FEE
EN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x s =		OR	X \$=	
₹	FIRST PRESEN	TATION OF MULTI	PLE DEPEND	ENT CLAIM (37 C	FR 1 16/di)			OR	X \$=	
	l					+s= TOTAL		OR	+ \$ =	
	•					ADD'L FEE		OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)										·
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
M	Total (37 CFR 1.16(c))		Minus		=	x \$ =		OR	x \$ =	155
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$ =		OR	x \$ =	
₹	FIRST PRESENT	ATION OF MULTII	LE DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+: =		OR	<del></del>	
				<del></del>		TOTAL ADD'L FEE		OR I	TOTAL ADD'L FEE	
	•	(Column 1)		(Column 2)	(Column 3)					
NTC		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RÁTE	ADDI- TIONAL
影	Total (37 CFR 1.16(c))	•	Minus	**	-	x \$_ =		OR	x \$ =	FEE
AMENDMENT	Independent (37 CFR 1.18(b))	•	Minus	***	=	x \$ =		Ī		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$ =		OR OR	× \$=	
									TOTAL	
•	If the entry in co	lumn 1 is less th	an the entry	in column 2, write	e "0" in column 3	ADD'L FEE [		OR	ADD'L FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.